



NUCLETRON B.V.

Waardgelder 1 3905 TH Veenendaal P.O.Box 930 3900 AX Veenendaal

The Netherlands

Phone +31 318 557133 Fax +31 318 550485

Department of Health and Human Services Centre of Device and Radiological Health Office of Device Evaluation Special 510(k) section

OCT - 8 2009

510(K) SUMMARY OF SAFETY AND EFFECTIVENESS INFORMATION

as required by section 807.92(c)

Submitter of 510(k):

Company name:

Nucletron Corporation

Registration number:

1121753

Address:

8671 Robert Fulton Drive

Columbia, MD 21046

Phone:

410-312-4100

Fax:

410-312-4197

Correspondent:

Elaina Colby

Manager Quality Assurance & Regulatory Affairs

Modified Device Name:

Trade/Proprietary Name:

MicroSelectron HDR Version 2

Common/Usual Name:

Afterloader

Classification Name:

Remote controlled radionuclide applicator system

Classification:

21Cfr892.5700 Class II

Product Code

JAQ

Legally Marketed Device(s)

Our device is substantially equivalent to the legally marketed predicate device cited in the table below:

Manufacturer:	Device:	510(k);#
Nucletron BV	MicroSelectron HDR Version 2	K953946

Description:

The microSelectron-HDR is a remote afterloading system for high dose rate brachytherapy treatment using a single iridium-192 radioactive source.

The MicroSelectron-HDR delivers a radiation dose distribution conforming to treatment data, which is either, manually entered at the workstation or imported from a treatment planning system.

The modifications to the cleared device k953946 are:

Increase of maximum source strength for treatment of patients from 10 Ci (aprox. 40.000 μGy.m²/h) to 12Ci (aprox. 48.000 μGy.m²/h).

Intended use:

The modified device has the same intended use as the legally marketed predicate device cited:

The MicroSelectron HDR Version 2 is intended to enable an operator to apply, by remote control, a radionuclide source into the body (including Interstitial, Intracavitary, Intraluminal, Bronchial, Endovascular and Intra-operative) or to the surface of the body for radiation therapy.

Summary of technological considerations:

MicroSelectron HDR Version 2 is substantially equivalent to the previously cleared device (K953946) and to the microSelectron_V3 (K061354).

Name: John Lagre

Title: Vice President R&D

Nucletron B/V

Veenendaal, The Netherlands

Food and Drug Administration 10903 New Hampshire Avenue Document Control Room – WO66-G609 Silver Spring, MD 20993-0002

Ms. Elaina M. Colby Manager, Quality Assurance & Regulatory Affairs Nucletron Corporation 8671 Robert Fulton Drive COLUMBIA MD 21046-2133

OCT - 8 2009

Re: K092804

Trade/Device Name: MicroSelectron HDR Version 2

Regulation Number: 21 CFR 892.5700

Regulation Name: Remote controlled radio-nuclide applicator system

Regulatory Class: II Product Code: JAQ

Dated: September 10, 2009 Received: September 11, 2009

Dear Ms. Colby:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 801); habeling (21 CFR Part 801); medical device reporting (reporting of medical

device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Singerely yours,

Janine M. Morris

Acting Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Indications for Use Statement

K092804

Device Name

MicroSelectron HDR Version 2

Indications for Use

The MicroSelectron HDR Version 2 is intended to enable an operator to apply, by remote control, a radionuclide source into the body (including Interstitial, Intracavitary, Intraluminal, Bronchial, Endovascular and Intra-operative) or to the surface of the body for

radiation therapy.

Prescript	ion Use	<u> X</u>
(Part 21 C	CFR 801	Subpart D)

AND/OR

Over-The-Counter Use _____(21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)

Division of Reproductive, Abdominal,

and Radiological Devices

510(k) Number___

192804